

**COMMISSION FOR MENTAL HEALTH, DEVELOPMENTAL DISABILITIES
AND SUBSTANCE ABUSE SERVICES**

Advisory Committee Minutes

**Holiday Inn-North
2805 Highwoods Blvd., Raleigh, N.C. 27604**

Wednesday, January 18, 2006

Attending:

Advisory Committee Members: Marvin Swartz, MD, Don Stedman, Ph.D., Pender McElroy, Floyd McCullouch, Martha Macon, Carl Shantzis, Lois Batton, Dorothy Crawford, Pearl Finch, Fredrica Stell, Emily Moore, Clayton Cone, Ann Forbes, Buren Harrelson and Judy Lewis

Ex-Officio Committee Members: Dave Richards

Excused: Mary Kelly, Paul Gulley

Division Staff: Leza Wainwright, Steven Hairston, Flo Stein, Denise Baker, Stacy Silvia-Overcash, Sheila Bazemore,

Others: None

Handouts:

Mailed Packet:

January 18, 2006 Advisory Committee Agenda
Workforce Development Plan 2004

Welcome, Introductions, and Approval of Minutes:

Chairman, Marvin Swartz opened the meeting at 9:47 a.m.

Mr. Swartz asked the Commission members, Ex-Officio Committee Members, Division Staff and visitors to introduce themselves.

Upon the motion, second and unanimous vote of the Committee the July 14, 2005 Advisory Committee minutes were approved.

Workforce Development:

Based on its previous meeting on workforce development Mr. Swartz asked the committee what issues did the committee want to focus on and what strategies did the committee want to use to gather the information. The suggestions Mr. Swartz offered were:

- 1.) Address the concerns as a committee of the whole and invite individuals to address the committee, or
- 2.) Develop a task force to report to the committee

At the request of Mr. McElroy, Mr. Swartz also asked the advisory committee to look at issues of how the activities of Mental Health reform can be more inclusive and how consumers and families can be more involved in the process.

Mr. Swartz gave a summary of the NC DMH/DD/SAS Workforce Development Plan for 2004:

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The Division workforce development plan for 2004 indicated the need to educate and develop strategies for workforce development and a comprehensive training plan for Division staff, develop training opportunities to carry out reform more broadly, and serve as a liaison to the Universities, AHEC's, Community Colleges, and other education systems regarding new rules and clinical skills.

The areas of training focus included person centered planning, quality management, cultural competency, evidence-based and best practices, and new rules.

Dr. Stedman asked what necessitated the need for a workforce development plan.

Leza Wainwright stated it was recommended because of the reform occurring in Mental Health.

Flo Stein stated that the Mental Health Block Grant also has a section that requires the Division to expound on how it will train its workforce.

Steven Hairston informed the committee of the following trainings the Division has initiated or completed as a part of the workforce development plan:

- 1.) Under the cultural competency initiatives, the Division and State facilities devised a Cultural Competency Advisory Group that produced a Cultural Competency Plan. The plan is currently in the 45-day comment period.
- 2.) The Division and State facilities have developed and initiated staff training that is being coordinated by the Division staff development coordinator, Shelia Bazemore. Ms. Bazemore is assessing the training needs of the Division and ensuring staff are receiving any mandatory training.
- 3.) The Division has conducted town hall meetings and video conferences across the state orienting providers on the new service definitions. The Division will continue the town hall meetings across the state in 2006.
- 4.) The Division and State facilities conducted customer service training that was completed in December of 2005. This training will be available to the LMEs and the LME can receive technical assistance from the Division staff development coordinator.

Mr. Swartz requested the status of the Division's statewide network for training.

Ms. Wainwright informed the advisory committee the Division has been focusing on the Service definitions and its roll out. She further stated the Division did not have the resources to build upon other long term issues addressed in the workforce development plan.

Ms. Flo Stein stated that the advisory committee should think about pre-employment workforce development and how community colleges, universities, and high schools prepare individuals to work in the healthcare field and graduate from the programs ready to work. Ms Stein further stated the Division spends the majority of its time on post-employment training.

Dr. Stedman stated that it should be expected that the service systems will participate in continuing professional development training but not to pay for pre-professional training. The state should look at teaching and nursing models used because of the workforce shortages those fields have experienced. A supply-demand study may raise the profile of the workforce issue but the key is getting the community colleges and universities system to acknowledge that these educational studies are something they should provide.

Clayton Cone asked why is the Division moving away from using CAFAS (Child and Adolescent Functional Assessment Scale) Ms. Wainwright stated the reason for discontinuing the use of mandatory CAFAS is the training was going to be cost prohibitive.

Mr. Swartz stated that another policy issue the workforce development plan doesn't address is whose responsibility it is to pay for what types of training

Ms. Wainwright answered that one of the models the Division can decide to use is similar to what was done for the new service definitions. This included preliminary training of approximately one hundred individuals who applied to serve as Division sanctioned trainers. The Division established mandatory parameters to qualify an applicant as a sanctioned trainer on the new service definitions.

Mr. Swartz stated that another element is Learning Portal. The original idea was the Division would be an information source to point people in the right direction in terms of where trainings are and what trainings are certified. He asked the Division's opinion on that issue.

Ms. Wainwright stated that the Division does not have the infrastructure to develop what was in the plan.

Ms. Lewis stated that she would like for the committee to find an avenue to pull together groups/individuals in the state that are already working on these types of issues to join together.

Carl Shantzis stated that he thinks the tasks should be divided into a two group process and product. On the process side, he suggested the committee do the following:

- 1.) Look into rules,
- 2.) Systems functions,
- 3.) Groups working on workforce development, and
- 4.) Training roles and responsibilities.

On the product side, he suggested the committee do the following:

- 1.) Identify who is in the workforce,
- 2.) Number needed,
- 3.) Identify how to meet the expectations, and
- 4.) Probe how to connect with leadership.

Mr. Swartz asked what outcome the advisory committee would like to see as a result of this study.

Mr. McElroy stated that the Commission statutory function, as it relates to the advisory committee, is to provide advice to the Secretary of DHHS and from the Secretary to the Division and to others outside of the Division.

Mr. Swartz asked Mr. Stedman what was the Housing Taskforce expectations at the end of their study. Mr. Stedman indicated that the goal of the Housing Taskforce was to:

- 1.) Raise the profile of the issue,
- 2.) Reinforce LMEs and Division staff and resources on programs and how they work.
- 3.) Engage other structures and professional organizations.

Advisory Committee members will focus on the workforce development issues in the following workgroups:

1. Raising or Heightening workforce development awareness,
2. Review the rules regarding training,
3. Articulate system functions and policy clarity between the Division, AP/LMEs, providers, and stakeholders, and
4. Analysis of statistical data

<u>Advisory Member</u>	<u>Workgroup</u>
Clayton Cone	data
Buren Harrelson	data
Dave Richards	rules
Judy Lewis	awareness
Don Stedman	analysis and heightening awareness
Carl Shantzis	system functions
Dorothy Crawford	rules
Martha Macon	heightening

Laura Coker stated that the service recipients across the state felt that their input hasn't been meaningful. When steps were taken in the past to engage consumers and families the input was treated as irrelevant. Many of the C-FAC members have felt that the C-FAC experience that was written in the state plan hasn't developed in a productive way. Ms. Coker further stated she spoke with the Chairman of the Commission for MH/DD/SAS, Pender McElroy, about ways the Commission could support better C-FAC development and take steps to have help creating language for rule to support the function and the roles of the C-FACs.

Ms. Coker further stated another concern was LME's have been able to dismiss and reconstitute C-FAC's without repercussions. The C-FAC has moved from being an informed group on local policy, local service and quality issues to the point of not being allowed to give written and oral reports that were given a year ago.

Mr. Swartz asked if there was a relationship between the local C-FAC and the State C-FAC. Ms. Wainwright stated the State C-FAC is comprised of at-large members of the C-FAC.

Mr. Swartz proposed to ask Chris Phillips, Chief of DMH/DD/SAS, Advocacy and Customer Service section, who has oversight of the State C-FAC and invite guest C-FAC members at the next advisory committee. The committee will ask for a report from Mr. Phillips that will provide clarification on what was intended for the C-FACs in the State Plan, what is the status of the C-FAC, and what development issues and barriers should be addressed.

There being no further business the meeting adjourned at 1:50pm